MISSISSIPPISTATE DEPARTMENT OF HEALTH 2016 OCT 10 PM 1: 58 CCR CERTIFICATION CALENDAR YEAR 2015 LAS 1700 Public Water Supply Name List PWS ID #s for all Community Water Systems included in this CCR The Federal Safe Drinking Water Act (SDWA) requires each Community public water system to develop and distribute a Consumer Confidence Report (CCR) to its customers each year. Depending on the population served by the public water system, this CCR must be mailed or delivered to the customers, published in a newspaper of local circulation, or provided to the customers upon request. Make sure you follow the proper procedures when distributing the CCR. You must mail, fax or email a copy of the CCR and Certification to MSDH. Please check all baxes that apply. Customers were informed of availability of CCR by: (Attach copy of publication, water bill or other) ○ Advertisement in local paper (attach copy of advertisement) On water bills (attach copy of bill) O Email message (MUST Émail the message to the address below) 0 Q Other Date(s) customers were informed: / / / / / / CCR was distributed by U.S. Postal Service or other direct delivery. Must specify other direct delivery methods used Date Mailed/Distributed: / / CCR was distributed by Email (MUST Email MSDH a copy) Date Emailed: / / 0 O As an attachment O As text within the body of the email message CCR was published in local newspaper. (Attach copy of published CCR or proof of publication) Name of Newspaper: Date Published: / / / Date Posted: / /-CCR was posted in public places. (Attack list of locations) CCR was posted on a publicly accessible internet site at the following address (DIRECT URL REQUIRED): CERTIFICATION Thereby certify that the 2015 Consumer Confidence Report (CCR) has been distributed to the customers of this public water system in the form and manner identified above and that I used distribution methods allowed by the SDWA. I further certify that the information included in this CCR is true and correct and is consistent with the water quality monitoring data provided to the public water system officials by the Mississippi State Department of Health, Bureau of Public Water Supply.

Deliver or send via U.S. Postal Service: Bureau of Public Water Supply P.O. Box 1700 Jackson, MS 39215

CCR Due to MSDE & Customers by July 1, 2016!

May be faxed to: (601)576-7800

May be emailed to:

water.reports@msdh.ms.gov

"2015 Annual Drinking Water Quality Report"

Symonds Water Association, Inc. PWS ID: 0060042 September 26, 2016

We're very pleased to provide you with this year's Annual Water Quality Report. We want to keep you informed about the excellent water and services we have delivered to you over the past year. Our goal is and always has been, to provide to you a safe and dependable supply of drinking water. Our water source is groundwater and our well draws from the Sparta Sand Aquifer.

Our source water assessment has been completed for our public water system to deliver the overall susceptibility of its drinking water supply to identify potential sources of contamination. The general susceptibility rankings assigned to each well of this system are provided below. A report containing detailed information on how the susceptibility determinations were made has been furnished to our public water system and is available for viewing upon request. Our well ranked a lower susceptibility to contamination.

We're pleased to report that our drinking water meets all federal and state requirements.

If you have any questions about this report or concerning your water utility, please contact Kelia Washington at 662-347-2936. We want our valued customers to be informed about their water utility. If you want to learn more, please attend one of our regular meetings held at 6:00 P.M on the first Monday of each month at the New Hope Church in Symonds.

Symonds Water Association routinely monitors for constituents in your drinking water according to Federal and State laws. The table below shows the results of our monitoring for the period of January 1st to December 31st, 2015. As water travels over the land or underground, it can pick up substances or contaminants such as microbes, inorganic and organic chemicals, and radioactive substances. All drinking water, including bottled drinking water, may be reasonably expected to contain at least small amounts of some constituents. It's important to remember that the presence of these constituents does not necessarily pose a health risk.

Action Level - the concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow.

Treatment Technique (TT) - A treatment technique is a required process intended to reduce the level of a contaminant in drinking water.

Maximum Contaminant Level - The "Maximum Allowed" (MCL) is the highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.

Maximum Contaminant Level Goal - The "Goal" (MCLG) is the level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.

MRDL: Maximum residual disinfectant level. The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Parts per million (ppm) – Milligrams per liter (mg/L).

Parts per billion (ppb) – Micrograms per liter (ug/L).

| TEST RESULTS | | | | | | | | |
|--|------------------|-----------------------|-------------------|--|---------------------|------|--------|---|
| Contaminant | Violation Y/N | Date Collected | Level Detected | Range of Detects or # of Samples Exceeding MCL/ACL | Unit Measurement | MCLG | MCL | Likely Source of Contamination |
| Disinfectants & Disinfection By-Products | | | | | | | | |
| (There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.) | | | | | | | | |
| Chlorine (as Cl2) (ppm) | N | 2015 | .80 | 0.6080 | ppm | 4 | 4 | Water additive used to control microbes |
| HAA5 | N | 2011* | 2.0 | No-range | ppb | 0 | 60.0 | By-product of drinking water chlorination |
| TTHM Total trihalomethanes | N | 2011* | 12.5 | No-range | ppb | 0 | 100 | By-product of drinking water chlorination |
| Inorganic Contaminants | | | | | | | | |
| Barium | N | 2011* | 0.0183 | No-range | ppm | 2 | 2 | Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits |
| Chromium | N | 2014 | 1.8 | No-range | ppb | 100 | 100 | Discharge from steel and pulp mills, emsion of natural deposits |
| Fluoride | N | 2011* | .16 | No-range | ppm | 4.0 | 4.0 | Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories |
| Copper | N | 1/1/12 to 12/31/14 | .7 | No-range | ppm | 1.3 | AL=1.3 | Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives |
| Volatile Organic Contaminants | | | | | | | | |
| HAA5 | N | 2014 | 3.0 | No-range | ppb | 0 | 60.0 | By-product of drinking water chlorination |
| TTHM Total trihalomethanes | N | 2014 | 1.09 | No-range | ppb | 0 | 100 | By-product of drinking water chlorination |

^{*}Most recent sample. No sample was required in 2015

*** Significant Deficiencies ***

Monitoring and reporting of compliance data violations

During a sanitary survey conducted on 10/12/2012, the Mississippi State Department of Health cited the following significant deficiencies:

Inadequate internal cleaning/maintence of storage tanks. Completed

Lack of redundant mechanical components where treatment is required. Completed

Corrective actions:

MSDH is currently working with this system to return them to compliance since the expiration of the compliance since the expiration of the compliance deadline. It is anticipated we will be returned to compliance by **June**, 30, 2016.

Additional Information for Lead

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. The **Farmington Water Association** is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at http://www.epa.gov/safewater/lead. Please contact 601-576-7582 if you wish to have your water tested.

All sources of drinking water are subject to potential contamination by substances that are naturally occurring or man made. These substances can be microbes, inorganic or organic chemicals and radioactive substances. All drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA/CDC guidelines on appropriate means to lessen the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (800-426-4791).

Please call the number above if you have any questions.